

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF  
COMMITTEE (in full)**USE FEC MAILING LABEL  
OR TYPE OR PRINT**Example: If typing, type  
over the lines

FREEDOM PROJECT; THE

ADDRESS (number and street)

631-B Pennsylvania Ave., SE

☐Check if different  
than previously  
reported. (ACC)

Washington

DC

20003

0003

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00305805

3. IS THIS  
REPORT☐NEW  
(N)

OR

☒AMENDED  
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

☐April 15  
Quarterly Report (Q1)☐July 15  
Quarterly Report (Q2)☐October 15  
Quarterly Report (Q3)☐January 31  
Quarterly Report (YE)☐July 31 Mid-Year  
Report (Non-election  
Year Only) (MY)☐Termination Report  
(TER)(b) Monthly  
Report  
Due On:☐

Feb 20 (M2)

☐

May 20 (M5)

☐

Aug 20 (M8)

☐Nov 20 (M11)  
(Non-Election  
Year Only)☐

Mar 20 (M3)

☐

Jun 20 (M6)

☐

Sep 20 (M9)

☐Dec 20 (M12)  
(Non-Election  
Year Only)☐

Apr 20 (M4)

☐

Jul 20 (M7)

☐

Oct 20 (M10)

☐

Jan 31 (YE)

(c) 12-Day  
**PRE-Election**  
Report for the:☐

Primary (12P)

☒

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12S)

Election on

1 1

0 2

2 0 1 0

in the  
State of

DC

(d) 30-Day  
**Post -Election**  
Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the  
State of

5. Covering Period

1 0

0 1

2 0 1 0

through

1 0

1 3

2 0 1 0

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Margee Clancy

Signature of Treasurer

Electronically Filed by Margee Clancy

Date

0 3

2 1

2 0 1 1

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office  
Use  
Only**FEC FORM 3X**  
(Rev. 12/2004)

# SUMMARY PAGE

## OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

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Write or Type Committee Name  
FREEDOM PROJECT; THE

Report Covering the Period: From: 

M	M
1	0

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To: 

M	M
1	0

D	D
1	3

Y	Y	Y	Y
2	0	1	0

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1	2010	313898.42
(b) Cash on Hand at Beginning of Reporting Period .....	346665.73	
(c) Total Receipts (from Line 19) .....	55525.00	1581285.01
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	402190.73	1895183.43
7. Total Disbursements (from Line 31) .....	107632.95	1600625.65
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	294557.78	294557.78
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	

☐ This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

### For further information contact:

Federal Election Commission  
999 E street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004)

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Write or Type Committee Name

FREEDOM PROJECT; THE

Report Covering the Period:

From:

M	M
1	0

D	D
0	1

Y	Y	Y	Y
2	0	1	0

To:

M	M
1	0

D	D
1	3

Y	Y	Y	Y
2	0	1	0

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A) .....	5025.00	385302.00
(ii) Unitemized .....	0.00	14546.27
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	5025.00	399848.27
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	30500.00	1069400.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	35525.00	1469248.27
12. Transfers From Affiliated/Other Party Committees .....	20000.00	107011.74
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	5025.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	55525.00	1581285.01
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	55525.00	1581285.01

## DETAILED SUMMARY PAGE

of Disbursements

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FEC Form 3X (Rev. 02/2003)

II. DISBURSEMENTS		COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:			
(a) Shared Federal/Non-Federal Activity (from Schedule H4)			
(i) Federal Share.....	0.00	0.00	
(ii) Non-Federal Share.....	0.00	0.00	
(b) Other Federal Operating Expenditures.....	102302.95	602558.65	
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➤	102302.95	602558.65	
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00	
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	5330.00	997877.00	
24. Independent Expenditure (use Schedule E) .....	0.00	0.00	
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00	
26. Loan Repayments Made.....	0.00	0.00	
27. Loans Made.....	0.00	0.00	
28. Refunds of Contributions To:			
(a) Individuals/Persons Other Than Political Committees .....	0.00	40.00	
(b) Political Party Committees	0.00	0.00	
(c) Other Political Committees (such as PACs) .....	0.00	0.00	
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	0.00	40.00	
29. Other Disbursements.....	0.00	150.00	
30. Federal Election Activity (2 U.S.C 431(20))			
(a) Shared Federal Election Activity (from Schedule H6)			
(i) Federal Share .....	0.00	0.00	
(ii) "Levin" Share .....	0.00	0.00	
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00	
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00	
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	107632.95	1600625.65	
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	107632.95	1600625.65	

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

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III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3) .....	35525.00	1469248.27
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	40.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	35525.00	1469208.27
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	102302.95	602558.65
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	102302.95	602558.65

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 / 36

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**FREEDOM PROJECT; THE**

**A.**

Full Name (Last, First, Middle Initial)

Jason Mulvihill

Mailing Address 1124 10th Street NW

City

Washington

State

DC

Zip Code

20001-4302

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Priv. Equity Growth Cap.  
Cou

Occupation

General Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 0 1 / 2 0 1 0

Transaction ID: SA11AI-12397-23223-c

Amount of Each Receipt this Period

500.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)

Douglas Lowenstein

Mailing Address 3902 Rosemary Street

City

Chevy Chase

State

MD

Zip Code

20815-5224

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Priv. Equity Growth Cap.  
Cou

Occupation

President & CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 0 1 / 2 0 1 0

Transaction ID: SA11AI-12398-23224-c

Amount of Each Receipt this Period

2500.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)

Alex Mistri

Mailing Address 440 12th Street NE  
Unit 107

City

Washington

State

DC

Zip Code

20002-6382

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Glover Park Group

Occupation

Govt. Affairs

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 1 1 / 2 0 1 0

Transaction ID: SA11AI-12429-23240-c

Amount of Each Receipt this Period

2000.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

5000.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 36

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
FREEDOM PROJECT; THE**A.**

Full Name (Last, First, Middle Initial)

Stanley Renyon

Mailing Address 5324 Feather River Drive

City

Stockton

State

CA

Zip Code

95219-8076

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
U.S. Postal Service

Occupation

Letter carrier

Receipt For:

☐ Primary  
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

25.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	3		2	0	1	0

Transaction ID: SA11AI-12430-23241-c

Amount of Each Receipt this Period

25.00

Earmarked to David Harmer,  
forwarded by TFP check 10-  
/19/10

SUBTOTAL of Receipts This Page (optional) .....

25.00

TOTAL This Period (last page this line number only) .....

5025.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 36

(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
 FREEDOM PROJECT; THE

**A.**

Full Name (Last, First, Middle Initial)

Alex Lee, Inc. PAC

Mailing Address 120 4th Street SW

City

Hickory

State

NC

Zip Code

28602-2947

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y  
 1 0 / 1 1 / 2 0 1 0

Transaction ID: SA12-9196-23209-P

Amount of Each Receipt this Period

5000.00

**[MEMO ITEM]**

Transfer Subitemization  
of Boehner for Speaker

**B.**

Full Name (Last, First, Middle Initial)

MCLANE COMPANY, INC. FEDERAL POLITICAL ACTION COMMITTEE

Mailing Address PO Box 6115

City

Temple

State

TX

Zip Code

76503-6115

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y  
 1 0 / 1 1 / 2 0 1 0

Transaction ID: SA12-6948-23209-P

Amount of Each Receipt this Period

5000.00

**[MEMO ITEM]**

Transfer Subitemization  
of Boehner for Speaker

**C.**

Full Name (Last, First, Middle Initial)

Philip Beck

Mailing Address 698 Blackthorn Road

City

Winnetka

State

IL

Zip Code

60093-2006

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Bartlit,Beck, Herman et  
al.

Occupation

Lawyer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y  
 1 0 / 1 1 / 2 0 1 0

Transaction ID: SA12-12423-23209-P

Amount of Each Receipt this Period

5000.00

**[MEMO ITEM]**

Transfer Subitemization  
of Boehner for Speaker

**SUBTOTAL** of Receipts This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 9 / 36

(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
 FREEDOM PROJECT; THE

**A.**

Full Name (Last, First, Middle Initial)

Joyce Gates

Mailing Address 4135 Seminary Road

City

Alexandria

State

VA

Zip Code

22304-1647

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Warehouse Productions

Occupation

Managing Partner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y  
 1 0 / 1 1 / 2 0 1 0

Transaction ID: SA12-6528-23209-P

Amount of Each Receipt this Period

5000.00

**[MEMO ITEM]**

Transfer Subitemization  
of Boehner for Speaker

**B.**

Full Name (Last, First, Middle Initial)

Rufus Lumry

Mailing Address 305 111th Avenue NE

City

Bellevue

State

WA

Zip Code

98004-5875

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Acorn Ventures

Occupation

CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2200.00

Date of Receipt

M M / D D / Y Y Y Y  
 1 0 / 1 1 / 2 0 1 0

Transaction ID: SA12-12420-23209-P

Amount of Each Receipt this Period

2200.00

**[MEMO ITEM]**

Transfer Subitemization  
of Boehner for Speaker

**C.**

Full Name (Last, First, Middle Initial)

Gary Walsh

Mailing Address 10 Hillocks Lane

City

Sheridan

State

WY

Zip Code

82801-9054

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y  
 1 0 / 1 1 / 2 0 1 0

Transaction ID: SA12-12422-23209-P

Amount of Each Receipt this Period

5000.00

**[MEMO ITEM]**

Transfer Subitemization  
of Boehner for Speaker

**SUBTOTAL** of Receipts This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 36

(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

FREEDOM PROJECT; THE

**A.**

Full Name (Last, First, Middle Initial)

Boehner for Speaker

Mailing Address 631 Pennsylvania Avenue SE  
Suite B

City State Zip Code  
Washington DC 20003-4452

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

105749.69

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 1 1 / 2 0 1 0

Transaction ID: SA12-11479-23209-c

Amount of Each Receipt this Period

20000.00

Transfer from affiliated  
committee

**SUBTOTAL** of Receipts This Page (optional) .....

20000.00

**TOTAL** This Period (last page this line number only) .....

20000.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 36

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
**FREEDOM PROJECT; THE**

**A.**

Full Name (Last, First, Middle Initial)  
**AMERICAN COLLEGE OF SURGEONS PROFESSIONAL ASSOCIATION PAC**

Mailing Address **1640 Wisconsin Avenue NW**

City State Zip Code  
**Washington DC 20007-7715**

FEC ID number of contributing federal political committee. **C** **C00382424**

Name of Employer Occupation

Receipt For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼  
**2500.00**

Date of Receipt

**10 / 08 / 2010**

**Transaction ID: SA11C-4276-23219-c**

Amount of Each Receipt this Period

**2500.00**

Contribution

**B.**

Full Name (Last, First, Middle Initial)  
**BASF CORPORATION EMPLOYEES POLITICAL ACTION COMMITTEE**

Mailing Address **100 Campus Drive**

City State Zip Code  
**Florham Park NJ 07932-1020**

FEC ID number of contributing federal political committee. **C** **C00340075**

Name of Employer Occupation

Receipt For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼  
**5000.00**

Date of Receipt

**10 / 08 / 2010**

**Transaction ID: SA11C-4266-23218-c**

Amount of Each Receipt this Period

**5000.00**

Contribution

**C.**

Full Name (Last, First, Middle Initial)  
**CHUBB CORPORATION POLITICAL ACTION COMMITTEE-CHUBBPAC, THE**

Mailing Address **15 Mountainview Road**

City State Zip Code  
**Warren NJ 07059-6711**

FEC ID number of contributing federal political committee. **C** **C00229203**

Name of Employer Occupation

Receipt For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼  
**5000.00**

Date of Receipt

**10 / 08 / 2010**

**Transaction ID: SA11C-3823-23215-c**

Amount of Each Receipt this Period

**2500.00**

Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

**10000.00**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 12 / 36

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
**FREEDOM PROJECT; THE**

**A.**

Full Name (Last, First, Middle Initial)  
**DIAGEO NORTH AMERICA INC. EMPLOYEES POLITICAL PARTICIPATION COMMITTEE**

Mailing Address **1301 K Street NW**  
**Suite 1000**

City State Zip Code  
**Washington DC 20005-3317**

FEC ID number of contributing  
federal political committee. **C** **C00034470**

Name of Employer Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**5000.00**

Date of Receipt

**10 / 08 / 2010**

**Transaction ID: SA11C-3698-23216-c**

Amount of Each Receipt this Period

**2500.00**

Contribution

**B.**

Full Name (Last, First, Middle Initial)  
**ELI LILLY AND COMPANY POLITICAL ACTION COMMITTEE**

Mailing Address **LILLY CORPORATE CENTER**

City State Zip Code  
**INDIANAPOLIS IN 46285**

FEC ID number of contributing  
federal political committee. **C** **C00082792**

Name of Employer Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**5000.00**

Date of Receipt

**10 / 08 / 2010**

**Transaction ID: SA11C-4184-23221-c**

Amount of Each Receipt this Period

**5000.00**

Contribution

**C.**

Full Name (Last, First, Middle Initial)  
**Hewlett Packard Company Pac**

Mailing Address **3000 Hanover Street**  
**# 1035**

City State Zip Code  
**Palo Alto CA 94304-1112**

FEC ID number of contributing  
federal political committee. **C** **C00196725**

Name of Employer Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**2500.00**

Date of Receipt

**10 / 08 / 2010**

**Transaction ID: SA11C-11110-23217-c**

Amount of Each Receipt this Period

**2500.00**

Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

**10000.00**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 13 / 36

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
 FREEDOM PROJECT; THE

**A.**

Full Name (Last, First, Middle Initial)  
 Mastercard International Inc. Employees' Pac

Mailing Address 2000 Purchase Street

City State Zip Code  
 Purchase NY 10577-2405

FEC ID number of contributing  
federal political committee. **C** C00410274

Name of Employer Occupation

Receipt For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼  
 2500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 1 0 / 0 8 / 2 0 1 0

Transaction ID: SA11C-10159-23222-c

Amount of Each Receipt this Period

2500.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)  
 OPPENHEIMER FUNDS INC. POLITICAL ACTION COMMITTEE

Mailing Address 1295 State Street

City State Zip Code  
 Springfield MA 01111-0001

FEC ID number of contributing  
federal political committee. **C** C00367920

Name of Employer Occupation

Receipt For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼  
 3000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 1 0 / 0 8 / 2 0 1 0

Transaction ID: SA11C-8979-23214-c

Amount of Each Receipt this Period

3000.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)  
 REAL ESTATE ROUNDTABLE POLITICAL ACTION COMMITTEE (REALPAC)

Mailing Address 801 Pennsylvania Avenue NW  
 Suite 720

City State Zip Code  
 Washington DC 20004-2686

FEC ID number of contributing  
federal political committee. **C** C00033779

Name of Employer Occupation

Receipt For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼  
 5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 1 0 / 0 8 / 2 0 1 0

Transaction ID: SA11C-4156-23213-c

Amount of Each Receipt this Period

5000.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

10500.00

**TOTAL** This Period (last page this line number only) .....

30500.00

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 14 / 36

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
FREEDOM PROJECT; THE

**A.**

Full Name (Last, First, Middle Initial)

Capitol Hill Club

Mailing Address 300 1st Street SE

City Washington State DC Zip Code 20003-1801

Purpose of Disbursement  
Mtg. exp. food & bev.

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B-5501-23205-e  
Date of Disbursement

10 / 08 / 2010

Amount of Each Disbursement this Period

231.58

**B.**

Full Name (Last, First, Middle Initial)

Capitol Hill Club

Mailing Address 300 1st Street SE

City Washington State DC Zip Code 20003-1801

Purpose of Disbursement  
Mtg. exp. food & bev.

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B-5501-23238-e  
Date of Disbursement

10 / 08 / 2010

Amount of Each Disbursement this Period

268.06

**C.**

Full Name (Last, First, Middle Initial)

Congressional Liquors

Mailing Address 404 1st Street SE

City Washington State DC Zip Code 20003-1826

Purpose of Disbursement  
Gen. fund. food & bev.

Candidate Name

003  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B-6678-11077-V  
Date of Disbursement

10 / 06 / 2010

Amount of Each Disbursement this Period

1442.38

**[MEMO ITEM]**

Subitemization of Mastercard ( 10/06/10 )

**SUBTOTAL** of Disbursements This Page (optional) .....

499.64

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 15 / 36

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
FREEDOM PROJECT; THE

<b>A.</b> Full Name (Last, First, Middle Initial) Mastercard <hr/> Mailing Address PO Box 42070	<b>Transaction ID:</b> SB21B-3605-23236-e <b>Date of Disbursement</b> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>0</td><td>6</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		0	6		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		0	6		2	0	1	0												
City Middletown State OH Zip Code 45042-0070 Purpose of Disbursement Credit card (see memo entries) Candidate Name <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div> Category/ Type Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Amount of Each Disbursement this Period</b> <div style="border: 1px solid black; padding: 5px; text-align: center;">40244.65</div>																				
<b>B.</b> Full Name (Last, First, Middle Initial) Montgomery Inn <hr/> Mailing Address 9440 Montgomery Road City Montgomery State OH Zip Code 45242-7603 Purpose of Disbursement Gen. fund. travel lodging Candidate Name <div style="border: 1px solid black; padding: 2px; display: inline-block;">002</div> Category/ Type Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> SB21B-3495-11098-V <b>Date of Disbursement</b> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>0</td><td>6</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table> <b>Amount of Each Disbursement this Period</b> <div style="border: 1px solid black; padding: 5px; text-align: center;">233.86</div> <p><b>[MEMO ITEM]</b>  Subitemization of Mastercard ( 10/06/10 )</p>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		0	6		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		0	6		2	0	1	0												
<b>C.</b> Full Name (Last, First, Middle Initial) Mastercard <hr/> Mailing Address PO Box 42070 City Middletown State OH Zip Code 45042-0070 Purpose of Disbursement Interest expense Candidate Name <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div> Category/ Type Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> SB21B-3605-11072-V <b>Date of Disbursement</b> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>0</td><td>6</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table> <b>Amount of Each Disbursement this Period</b> <div style="border: 1px solid black; padding: 5px; text-align: center;">954.04</div> <p><b>[MEMO ITEM]</b>  Subitemization of Mastercard ( 10/06/10 )</p>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		0	6		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		0	6		2	0	1	0												

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

**40244.65**

**TOTAL** This Period (last page this line number only) ..... ►

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 16 / 36

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
FREEDOM PROJECT; THE

<b>A.</b> Full Name (Last, First, Middle Initial) US Airways Mailing Address 2345 Crystal Drive	<b>Transaction ID:</b> SB21B-3616-11071-V <b>Date of Disbursement</b> <div> <div>10</div> <div>06</div> <div>2010</div> </div>
City Arlington State VA Zip Code 22227-0001 Purpose of Disbursement Gen. fund. travel airfare Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Amount of Each Disbursement this Period</b> <div>475.40</div> <b>[MEMO ITEM]</b> Subitemization of Mastercard ( 10/06/10 )
<b>B.</b> Full Name (Last, First, Middle Initial) Schneider's of Capitol Hill Mailing Address 300 Massachusetts Avenue NE City Washington State DC Zip Code 20002-5702 Purpose of Disbursement Gen. fund. food & bev. Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB21B-3640-11075-V <b>Date of Disbursement</b> <div> <div>10</div> <div>06</div> <div>2010</div> </div> <b>Amount of Each Disbursement this Period</b> <div>403.01</div> <b>[MEMO ITEM]</b> Subitemization of Mastercard ( 10/06/10 )
<b>C.</b> Full Name (Last, First, Middle Initial) USPS Mailing Address 1200 Pennsylvania Avenue NW City Washington State DC Zip Code 20004-2403 Purpose of Disbursement Postage Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB21B-3727-11094-V <b>Date of Disbursement</b> <div> <div>10</div> <div>06</div> <div>2010</div> </div> <b>Amount of Each Disbursement this Period</b> <div>225.16</div> <b>[MEMO ITEM]</b> Subitemization of Mastercard ( 10/06/10 )
<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<div>0.00</div>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	



# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 17 / 36

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
FREEDOM PROJECT; THE

<b>A.</b> Full Name (Last, First, Middle Initial) 123 Together.com	<b>Transaction ID:</b> SB21B-10075-11069-V <b>Date of Disbursement</b>																				
Mailing Address 111 S Bedford Street Suite 200	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>0</td><td>6</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		0	6		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		0	6		2	0	1	0												
City Burlington State MA Zip Code 01803-5145	Amount of Each Disbursement this Period <table border="1"> <tr> <td>3</td><td>6</td><td>9</td><td>.</td><td>7</td><td>2</td> </tr> </table>	3	6	9	.	7	2														
3	6	9	.	7	2																
Purpose of Disbursement Internet Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	001 Category/ Type  <b>[MEMO ITEM]</b> Subitemization of Mastercard ( 10/06/10 )																				
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																					
<b>B.</b> Full Name (Last, First, Middle Initial) UPS Store	<b>Transaction ID:</b> SB21B-4328-11068-V <b>Date of Disbursement</b>																				
Mailing Address 611 Pennsylvania Avenue SE	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>0</td><td>6</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		0	6		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		0	6		2	0	1	0												
City Washington State DC Zip Code 20003-4303	Amount of Each Disbursement this Period <table border="1"> <tr> <td>1</td><td>8</td><td>9</td><td>.</td><td>8</td><td>4</td> </tr> </table>	1	8	9	.	8	4														
1	8	9	.	8	4																
Purpose of Disbursement Shipping Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	001 Category/ Type  <b>[MEMO ITEM]</b> Subitemization of Mastercard ( 10/06/10 )																				
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																					
<b>C.</b> Full Name (Last, First, Middle Initial) Federal Express	<b>Transaction ID:</b> SB21B-5079-11044-V <b>Date of Disbursement</b>																				
Mailing Address PO Box 693	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>0</td><td>6</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		0	6		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		0	6		2	0	1	0												
City Memphis State TN Zip Code 38101-0693	Amount of Each Disbursement this Period <table border="1"> <tr> <td>6</td><td>7</td><td>0</td><td>.</td><td>4</td><td>0</td> </tr> </table>	6	7	0	.	4	0														
6	7	0	.	4	0																
Purpose of Disbursement Shipping Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	001 Category/ Type  <b>[MEMO ITEM]</b> Subitemization of Mastercard ( 10/06/10 )																				
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																					
<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<table border="1"> <tr> <td>0</td><td>0</td><td>0</td> </tr> </table>	0	0	0																	
0	0	0																			
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	<table border="1"> <tr> <td></td><td></td><td></td> </tr> </table>																				

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 18 / 36

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
FREEDOM PROJECT; THE

<b>A.</b> Full Name (Last, First, Middle Initial) Delta Air Lines Mailing Address PO Box 20706	<b>Transaction ID:</b> SB21B-5296-11093-V <b>Date of Disbursement</b> <div> <div>10</div> <div>06</div> <div>2010</div> </div>
City Atlanta State GA Zip Code 30320-6001 Purpose of Disbursement Gen. fund. travel airfare Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Amount of Each Disbursement this Period</b> <div>1880.70</div> <b>[MEMO ITEM]</b> Subitemization of Mastercard ( 10/06/10 )
<b>B.</b> Full Name (Last, First, Middle Initial) Muirfield Village Golf Club Mailing Address PO Box 565 City Dublin State OH Zip Code 43017-0565 Purpose of Disbursement Gen. fund. greens fees Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB21B-5518-11104-V <b>Date of Disbursement</b> <div>10062010</div> <b>Amount of Each Disbursement this Period</b> <div>837.98</div> <b>[MEMO ITEM]</b> Subitemization of Mastercard ( 10/06/10 )
<b>C.</b> Full Name (Last, First, Middle Initial) Staples Mailing Address 8 Technology Drive # 1020 City Westborough State MA Zip Code 01581-1756 Purpose of Disbursement Office supplies Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB21B-6636-11064-V <b>Date of Disbursement</b> <div>10062010</div> <b>Amount of Each Disbursement this Period</b> <div>782.33</div> <b>[MEMO ITEM]</b> Subitemization of Mastercard ( 10/06/10 )

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

0.00

**TOTAL** This Period (last page this line number only) ..... ►

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 19 / 36

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
FREEDOM PROJECT; THE

**A.**

Full Name (Last, First, Middle Initial)  
York Harbor Reading

Mailing Address 491 York Street

City York State ME Zip Code 03909-1535

Purpose of Disbursement  
Gen. fund. food & bev.

Candidate Name

003

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B-10822-11105-V  
Date of Disbursement

10 / 06 / 2010

Amount of Each Disbursement this Period

1520.67

**[MEMO ITEM]**

Subitemization of Mastercard ( 10/06/10 )

**B.**

Full Name (Last, First, Middle Initial)  
American Airlines

Mailing Address NASA Building

City Stennis Space Cent State MS Zip Code 39529

Purpose of Disbursement  
Gen. fund. travel airfare

Candidate Name

002

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B-6717-11058-V  
Date of Disbursement

10 / 06 / 2010

Amount of Each Disbursement this Period

760.40

**[MEMO ITEM]**

Subitemization of Mastercard ( 10/06/10 )

**C.**

Full Name (Last, First, Middle Initial)  
Hyde Park Chop House

Mailing Address 6360 Frantz Road

City Dublin State OH Zip Code 43017-1307

Purpose of Disbursement  
Gen. fund. food & bev.

Candidate Name

003

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B-8559-11101-V  
Date of Disbursement

10 / 06 / 2010

Amount of Each Disbursement this Period

517.19

**[MEMO ITEM]**

Subitemization of Mastercard ( 10/06/10 )

**SUBTOTAL** of Disbursements This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 20 / 36

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)  
FREEDOM PROJECT; THE

<b>A.</b> Full Name (Last, First, Middle Initial) Embassy Suites - Dublin	<b>Transaction ID:</b> SB21B-8560-11102-V <b>Date of Disbursement</b>
Mailing Address 5100 Upper Metro Place	<div> <div>10</div> <div>06</div> <div>2010</div> </div>
City Dublin State OH Zip Code 43017-3384	Amount of Each Disbursement this Period
Purpose of Disbursement Gen. fund. travel, lodging Candidate Name	<div>781.21</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<div>002</div> Category/ Type  <b>[MEMO ITEM]</b> Subitemization of Mastercard ( 10/06/10 )
<b>B.</b> Full Name (Last, First, Middle Initial) Al's Pizza	<b>Transaction ID:</b> SB21B-8826-11074-V <b>Date of Disbursement</b>
Mailing Address 1382 E Capitol Street NE	<div> <div>10</div> <div>06</div> <div>2010</div> </div>
City Washington State DC Zip Code 20003-1533	Amount of Each Disbursement this Period
Purpose of Disbursement Mtg. exp. food & bev. Candidate Name	<div>299.17</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<div>001</div> Category/ Type  <b>[MEMO ITEM]</b> Subitemization of Mastercard ( 10/06/10 )
<b>C.</b> Full Name (Last, First, Middle Initial) 3 Dog Consulting	<b>Transaction ID:</b> SB21B-10028-11062-V <b>Date of Disbursement</b>
Mailing Address 104 East Hume Avenue	<div> <div>10</div> <div>06</div> <div>2010</div> </div>
City Alexandria State VA Zip Code 22301	Amount of Each Disbursement this Period
Purpose of Disbursement Gen. fund. consulting Candidate Name	<div>850.00</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<div>003</div> Category/ Type  <b>[MEMO ITEM]</b> Subitemization of Mastercard ( 10/06/10 )

**SUBTOTAL** of Disbursements This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 21 / 36

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
FREEDOM PROJECT; THE

A.

Full Name (Last, First, Middle Initial)  
Universal Orlando Universal City

Mailing Address 1000 Universal Studios Plaza

City Orlando State FL Zip Code 32819-7601

Purpose of Disbursement  
Gen. fund. event deposit

Candidate Name

003  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B-12395-11106-V  
Date of Disbursement

10 / 06 / 2010

Amount of Each Disbursement this Period

2432.19

**[MEMO ITEM]**

Subitemization of Mastercard ( 10/06/10 )

B.

Full Name (Last, First, Middle Initial)  
Minuteman Press

Mailing Address 555 New Jersey Avenue NW

City Washington State DC Zip Code 20001-2029

Purpose of Disbursement  
Printing

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B-10169-11103-V  
Date of Disbursement

10 / 06 / 2010

Amount of Each Disbursement this Period

292.56

**[MEMO ITEM]**

Subitemization of Mastercard ( 10/06/10 )

C.

Full Name (Last, First, Middle Initial)  
Trattoria Alberto

Mailing Address 506 8th Street SE

City Washington State DC Zip Code 20003-2834

Purpose of Disbursement  
Mtg. exp. food & bev.

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B-10171-11076-V  
Date of Disbursement

10 / 06 / 2010

Amount of Each Disbursement this Period

326.50

**[MEMO ITEM]**

Subitemization of Mastercard ( 10/06/10 )

**SUBTOTAL** of Disbursements This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 22 / 36

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
FREEDOM PROJECT; THE

**A.**

Full Name (Last, First, Middle Initial)  
Szechuan House Fusion Grill

Mailing Address 515 8th Street SE

City Washington State DC Zip Code 20003-2835

Purpose of Disbursement  
Mtg. exp. food & bev.

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B-10221-11080-V  
Date of Disbursement

10 / 06 / 2010

Amount of Each Disbursement this Period

125.50

**[MEMO ITEM]**

Subitemization of Mastercard ( 10/06/10 )

**B.**

Full Name (Last, First, Middle Initial)  
Sonoma

Mailing Address 223 Pennsylvania Avenue SE

City Washington State DC Zip Code 20003-1107

Purpose of Disbursement  
Mtg. exp. food & bev.

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B-10482-11063-V  
Date of Disbursement

10 / 06 / 2010

Amount of Each Disbursement this Period

275.90

**[MEMO ITEM]**

Subitemization of Mastercard ( 10/06/10 )

**C.**

Full Name (Last, First, Middle Initial)  
Hotels.com

Mailing Address PO Box 201906

City Arlington State TX Zip Code 76006-1906

Purpose of Disbursement  
Gen. fund. travel, lodging

Candidate Name

002  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B-10721-11086-V  
Date of Disbursement

10 / 06 / 2010

Amount of Each Disbursement this Period

630.33

**[MEMO ITEM]**

Subitemization of Mastercard ( 10/06/10 )

**SUBTOTAL** of Disbursements This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
FREEDOM PROJECT; THE

<b>A.</b> Full Name (Last, First, Middle Initial) ATTM Mailing Address 5565 Glenridge Drive NE	<b>Transaction ID:</b> SB21B-12419-11107-V <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>1 0 / 0 6 / 2 0 1 0</div> </div>
City Atlanta State GA Zip Code 30342-1335 Purpose of Disbursement Internet Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Amount of Each Disbursement this Period</b> <div>225.08</div> <b>[MEMO ITEM]</b> Subitemization of Mastercard ( 10/06/10 )
<b>B.</b> Full Name (Last, First, Middle Initial) Edwards' Harborside Inn Mailing Address Stage Neck Road City York Harbor State ME Zip Code 03911 Purpose of Disbursement Gen. fund. travel, lodging Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB21B-10828-11050-V <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>1 0 / 0 6 / 2 0 1 0</div> </div> <b>Amount of Each Disbursement this Period</b> <div>1702.00</div> <b>[MEMO ITEM]</b> Subitemization of Mastercard ( 10/06/10 )
<b>C.</b> Full Name (Last, First, Middle Initial) Google Inc., Advertising Programs Mailing Address 1600 Amphitheatre Parkway City Mountain View State CA Zip Code 94043-1351 Purpose of Disbursement TFP website advertising Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB21B-11085-11060-V <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>1 0 / 0 6 / 2 0 1 0</div> </div> <b>Amount of Each Disbursement this Period</b> <div>3860.56</div> <b>[MEMO ITEM]</b> Subitemization of Mastercard ( 10/06/10 )
<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<div>0.00</div>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 24 / 36

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
FREEDOM PROJECT; THE

<b>A.</b> Full Name (Last, First, Middle Initial) Facebook Advertising	<b>Transaction ID:</b> SB21B-11148-11049-V <b>Date of Disbursement</b>
Mailing Address 1601 S California Avenue	<div> <div>10</div> <div>06</div> <div>2010</div> </div>
City Palo Alto State CA Zip Code 94304-1111	Amount of Each Disbursement this Period
Purpose of Disbursement TFP website advertising Candidate Name	<div>4691.91</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<div>003</div> Category/Type  <b>[MEMO ITEM]</b> Subitemization of Mastercard ( 10/06/10 )
<b>B.</b> Full Name (Last, First, Middle Initial) Mailchimp.com	<b>Transaction ID:</b> SB21B-12123-11065-V <b>Date of Disbursement</b>
Mailing Address 512 Means Street NW Suite 404	<div> <div>10</div> <div>06</div> <div>2010</div> </div>
City Atlanta State GA Zip Code 30318-5788	Amount of Each Disbursement this Period
Purpose of Disbursement Email list maintenance Candidate Name	<div>529.00</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<div>003</div> Category/Type  <b>[MEMO ITEM]</b> Subitemization of Mastercard ( 10/06/10 )
<b>C.</b> Full Name (Last, First, Middle Initial) Apple Store	<b>Transaction ID:</b> SB21B-12125-11090-V <b>Date of Disbursement</b>
Mailing Address 2700 Clarendon Boulevard	<div> <div>10</div> <div>06</div> <div>2010</div> </div>
City Arlington State VA Zip Code 22201-7005	Amount of Each Disbursement this Period
Purpose of Disbursement Computer purchase Candidate Name	<div>894.55</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<div>001</div> Category/Type  <b>[MEMO ITEM]</b> Subitemization of Mastercard ( 10/06/10 )
<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<div>0.00</div>
<b>TOTAL</b> This Period (last page this line number only) .....	



# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 25 / 36

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
FREEDOM PROJECT; THE

<b>A.</b> Full Name (Last, First, Middle Initial) The Alamo Travel Group	<b>Transaction ID:</b> SB21B-4316-11057-V <b>Date of Disbursement</b>																				
Mailing Address 9000 Wurzbach Road	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>0</td><td>6</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		0	6		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		0	6		2	0	1	0												
City San Antonio State TX Zip Code 78240-1038	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Gen. fund. travel reserv. fee	<table border="1"> <tr> <td colspan="10">100.00</td> </tr> </table>	100.00																			
100.00																					
Candidate Name	<table border="1"> <tr> <td>002</td> </tr> </table> Category/ Type	002																			
002																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<b>[MEMO ITEM]</b> Subitemization of Mastercard ( 10/06/10 )																				
<b>B.</b> Full Name (Last, First, Middle Initial) York Harbor Inn	<b>Transaction ID:</b> SB21B-12400-11045-V <b>Date of Disbursement</b>																				
Mailing Address PO Box 573	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>0</td><td>6</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		0	6		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		0	6		2	0	1	0												
City York Harbor State ME Zip Code 03911-0573	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Gen. fund. food & bev.	<table border="1"> <tr> <td colspan="10">448.19</td> </tr> </table>	448.19																			
448.19																					
Candidate Name	<table border="1"> <tr> <td>003</td> </tr> </table> Category/ Type	003																			
003																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<b>[MEMO ITEM]</b> Subitemization of Mastercard ( 10/06/10 )																				
<b>C.</b> Full Name (Last, First, Middle Initial) Circle K	<b>Transaction ID:</b> SB21B-12406-11054-V <b>Date of Disbursement</b>																				
Mailing Address 5569 State Route 193	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>0</td><td>6</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		0	6		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		0	6		2	0	1	0												
City Kingsville State OH Zip Code 44048-7715	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Travel, fuel	<table border="1"> <tr> <td colspan="10">385.14</td> </tr> </table>	385.14																			
385.14																					
Candidate Name	<table border="1"> <tr> <td>002</td> </tr> </table> Category/ Type	002																			
002																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<b>[MEMO ITEM]</b> Subitemization of Mastercard ( 10/06/10 )																				

**SUBTOTAL** of Disbursements This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 26 / 36

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
FREEDOM PROJECT; THE

<b>A.</b> Full Name (Last, First, Middle Initial) Ritz Carlton Mailing Address 1515 W 3rd Street	<b>Transaction ID:</b> SB21B-12407-11055-V <b>Date of Disbursement</b> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>0</td><td>6</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		0	6		2	0	1	0										
M	M	/	D	D	/	Y	Y	Y	Y																						
1	0		0	6		2	0	1	0																						
City Cleveland State OH Zip Code 44113-1403 Purpose of Disbursement Gen. fund. travel, lodging Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td colspan="10">1622.51</td> </tr> </table> <b>[MEMO ITEM]</b> Subitemization of Mastercard ( 10/06/10 )	1622.51																													
1622.51																															
<b>B.</b> Full Name (Last, First, Middle Initial) The Liaison Mailing Address 415 New Jersey Avenue NW City Washington State DC Zip Code 20001-2001 Purpose of Disbursement Gen. fund. food & bev. Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB21B-12415-11085-V <b>Date of Disbursement</b> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>0</td><td>6</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table> <b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td colspan="10">4673.22</td> </tr> </table> <b>[MEMO ITEM]</b> Subitemization of Mastercard ( 10/06/10 )	M	M	/	D	D	/	Y	Y	Y	Y	1	0		0	6		2	0	1	0	4673.22									
M	M	/	D	D	/	Y	Y	Y	Y																						
1	0		0	6		2	0	1	0																						
4673.22																															
<b>C.</b> Full Name (Last, First, Middle Initial) Uncle Julio's Mailing Address 16150 Dallas Parkway City Dallas State TX Zip Code 75248-2602 Purpose of Disbursement Gen. fund. food & bev. Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB21B-12418-11091-V <b>Date of Disbursement</b> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>0</td><td>6</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table> <b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td colspan="10">1020.88</td> </tr> </table> <b>[MEMO ITEM]</b> Subitemization of Mastercard ( 10/06/10 )	M	M	/	D	D	/	Y	Y	Y	Y	1	0		0	6		2	0	1	0	1020.88									
M	M	/	D	D	/	Y	Y	Y	Y																						
1	0		0	6		2	0	1	0																						
1020.88																															

**SUBTOTAL** of Disbursements This Page (optional) .....

**0.00**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 27 / 36

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)  
FREEDOM PROJECT; THE

A.

Full Name (Last, First, Middle Initial)  
NJI New Media, LLC

Mailing Address 201 King Street

City Alexandria State VA Zip Code 22314-6600

Purpose of Disbursement  
Website contribution processing

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B-11448-23242-e  
Date of Disbursement

10 / 04 / 2010

Amount of Each Disbursement this Period

72.90

B.

Full Name (Last, First, Middle Initial)  
NJI New Media, LLC

Mailing Address 201 King Street

City Alexandria State VA Zip Code 22314-6600

Purpose of Disbursement  
Website contribution processing

Candidate Name

003  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B-11448-23225-e  
Date of Disbursement

10 / 05 / 2010

Amount of Each Disbursement this Period

120.00

C.

Full Name (Last, First, Middle Initial)  
NJI New Media, LLC

Mailing Address 201 King Street

City Alexandria State VA Zip Code 22314-6600

Purpose of Disbursement  
Website development and maint.

Candidate Name

003  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B-11448-23244-e  
Date of Disbursement

10 / 06 / 2010

Amount of Each Disbursement this Period

9600.00

SUBTOTAL of Disbursements This Page (optional) .....

9792.90

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 28 / 36

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
FREEDOM PROJECT; THE

**A.**

Full Name (Last, First, Middle Initial)  
NJI New Media, LLC

Mailing Address 201 King Street

City Alexandria State VA Zip Code 22314-6600

Purpose of Disbursement  
Website development and maint.

Candidate Name

003  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B-11448-23245-e  
Date of Disbursement

10 / 06 / 2010

Amount of Each Disbursement this Period

9600.00

**B.**

Full Name (Last, First, Middle Initial)  
NJI New Media, LLC

Mailing Address 201 King Street

City Alexandria State VA Zip Code 22314-6600

Purpose of Disbursement  
Website development and maintenance

Candidate Name

003  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B-11448-23246-e  
Date of Disbursement

10 / 11 / 2010

Amount of Each Disbursement this Period

9600.00

**C.**

Full Name (Last, First, Middle Initial)  
NJI New Media, LLC

Mailing Address 201 King Street

City Alexandria State VA Zip Code 22314-6600

Purpose of Disbursement  
Website contribution processing

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B-11448-23243-e  
Date of Disbursement

10 / 13 / 2010

Amount of Each Disbursement this Period

81.00

**SUBTOTAL** of Disbursements This Page (optional) .....

19281.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 29 / 36

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
FREEDOM PROJECT; THE

A.

Full Name (Last, First, Middle Initial)  
Universal Orlando Universal City

Mailing Address 1000 Universal Studios Plaza

City Orlando State FL Zip Code 32819-7601

Purpose of Disbursement  
Gen. fund. event deposit

Candidate Name

003  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B-12395-23206-e  
Date of Disbursement

10 / 08 / 2010

Amount of Each Disbursement this Period

4864.39

B.

Full Name (Last, First, Middle Initial)  
Washington Courier

Mailing Address 5520 Cherokee Avenue  
Suite 120

City Alexandria State VA Zip Code 22312-2319

Purpose of Disbursement  
Courier

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B-9969-23204-e  
Date of Disbursement

10 / 08 / 2010

Amount of Each Disbursement this Period

85.77

C.

Full Name (Last, First, Middle Initial)  
John Criscuolo

Mailing Address 1845 A Street SE

City Washington State DC Zip Code 20003-1706

Purpose of Disbursement  
Mtg. exp. food & bev. reimb.

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B-10858-23203-e  
Date of Disbursement

10 / 08 / 2010

Amount of Each Disbursement this Period

224.59

SUBTOTAL of Disbursements This Page (optional) .....

5174.75

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 30 / 36

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
FREEDOM PROJECT; THE

**A.**

Full Name (Last, First, Middle Initial)

Bruce Gates

Mailing Address 4135 Seminary Road

City Alexandria State VA Zip Code 22304-1647

Purpose of Disbursement  
Gen. fund. lodging reimb.

Candidate Name

002  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B-5055-23210-e  
Date of Disbursement

10 / 11 / 2010

Amount of Each Disbursement this Period

440.00

**B.**

Full Name (Last, First, Middle Initial)

Bruce Gates

Mailing Address 4135 Seminary Road

City Alexandria State VA Zip Code 22304-1647

Purpose of Disbursement  
Adv. pmt., greens fees, food & bev. (see memo entry)

Candidate Name

003  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B-5055-23211-e  
Date of Disbursement

10 / 11 / 2010

Amount of Each Disbursement this Period

26286.51

**C.**

Full Name (Last, First, Middle Initial)

Robert Trent Jones Club

Mailing Address 1 Turtle Point Drive

City Gainesville State VA Zip Code 20155-2803

Purpose of Disbursement  
Adv. pmt., greens fees, food & bev.

Candidate Name

003  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B-4359-11264-V  
Date of Disbursement

10 / 11 / 2010

Amount of Each Disbursement this Period

26286.51

**[MEMO ITEM]**

Subitemization of Bruce  
Gates ( 10/11/10 )

**SUBTOTAL** of Disbursements This Page (optional) .....

26726.51

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 31 / 36

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
FREEDOM PROJECT; THE

**A.**

Full Name (Last, First, Middle Initial)

Kevin McGrann

Mailing Address 150 N Carolina Avenue SE

City Washington State DC Zip Code 20003-1841

Purpose of Disbursement  
Mtg. exp. food & bev. reimb.

Candidate Name

002  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B-4052-23200-e  
Date of Disbursement

10 / 06 / 2010

Amount of Each Disbursement this Period

96.53

**B.**

Full Name (Last, First, Middle Initial)

H. Ron Wietzel

Mailing Address 7378 Charter Cup Lane

City West Chester State OH Zip Code 45069-1593

Purpose of Disbursement  
Travel reimbursement

Candidate Name

002  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B-3809-23237-e  
Date of Disbursement

10 / 08 / 2010

Amount of Each Disbursement this Period

134.97

**SUBTOTAL** of Disbursements This Page (optional) .....

231.50

**TOTAL** This Period (last page this line number only) .....

101950.95

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 32 / 36

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
FREEDOM PROJECT; THE

<b>A.</b> Full Name (Last, First, Middle Initial) Citizens For Rothfus Inc	<b>Transaction ID:</b> SB23-12392-23228-e <b>Date of Disbursement</b>																				
Mailing Address PO Box 259	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>0</td><td>5</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		0	5		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		0	5		2	0	1	0												
City Allison Park State PA Zip Code 15101-0259	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Earmarked by Pete Schmitt 9/29/10	<table border="1"> <tr> <td colspan="10">50.00</td> </tr> </table>	50.00																			
50.00																					
Candidate Name Keith J Rothfus	<table border="1"> <tr> <td>011</td> </tr> <tr> <td>Category/ Type</td> </tr> </table>	011	Category/ Type																		
011																					
Category/ Type																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 04	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) Daniel Webster For Congress	<b>Transaction ID:</b> SB23-12015-23227-e <b>Date of Disbursement</b>																				
Mailing Address 3400 Old Winter Garden Road	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>0</td><td>5</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		0	5		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		0	5		2	0	1	0												
City Orlando State FL Zip Code 32805-1134	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Earmarked by Sandra Morton 9/28/10	<table border="1"> <tr> <td colspan="10">25.00</td> </tr> </table>	25.00																			
25.00																					
Candidate Name Daniel Webster	<table border="1"> <tr> <td>011</td> </tr> <tr> <td>Category/ Type</td> </tr> </table>	011	Category/ Type																		
011																					
Category/ Type																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 08	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) Hellberg For Congress	<b>Transaction ID:</b> SB23-12375-23230-e <b>Date of Disbursement</b>																				
Mailing Address 144 Rochelle Avenue	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>0</td><td>5</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		0	5		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		0	5		2	0	1	0												
City Philadelphia State PA Zip Code 19128-3810	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Earmarked by Henry Schea 9/27/10	<table border="1"> <tr> <td colspan="10">50.00</td> </tr> </table>	50.00																			
50.00																					
Candidate Name Rick Hellberg	<table border="1"> <tr> <td>011</td> </tr> <tr> <td>Category/ Type</td> </tr> </table>	011	Category/ Type																		
011																					
Category/ Type																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 02	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

**SUBTOTAL** of Disbursements This Page (optional) .....

125.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 33 / 36

☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)  
FREEDOM PROJECT; THE

A.

Full Name (Last, First, Middle Initial)  
Landry For Louisiana

Mailing Address PO Box 13816

City State Zip Code  
New Iberia LA 70562-3816

Purpose of Disbursement  
Contribution

Candidate Name  
Jeffrey M Landry

Office Sought: ☒ House  
☐ Senate  
☐ President

State: LA District: 03

Disbursement For: 2010  
☐ Primary ☒ General  
☐ Other (specify) ▼

011  
Category/  
Type

Transaction ID: SB23-12394-23201-e  
Date of Disbursement

10 / 06 / 2010

Amount of Each Disbursement this Period

5000.00

B.

Full Name (Last, First, Middle Initial)  
Lou Barletta for Congress

Mailing Address PO Box 128

City State Zip Code  
Hazleton PA 18201-0128

Purpose of Disbursement  
Earmarked by Donald Burd 9/30/10

Candidate Name  
Lou Barletta

Office Sought: ☒ House  
☐ Senate  
☐ President

State: PA District: 11

Disbursement For: 2010  
☐ Primary ☒ General  
☐ Other (specify) ▼

011  
Category/  
Type

Transaction ID: SB23-10350-23229-e  
Date of Disbursement

10 / 05 / 2010

Amount of Each Disbursement this Period

5.00

C.

Full Name (Last, First, Middle Initial)  
Marino For Congress

Mailing Address PO Box 653

City State Zip Code  
Williamsport PA 17703-0653

Purpose of Disbursement  
Earmarked by Kristen Mebius 9/17/10

Candidate Name  
Thomas Anthony Marino

Office Sought: ☒ House  
☐ Senate  
☐ President

State: PA District: 10

Disbursement For: 2010  
☐ Primary ☒ General  
☐ Other (specify) ▼

011  
Category/  
Type

Transaction ID: SB23-12100-23226-e  
Date of Disbursement

10 / 05 / 2010

Amount of Each Disbursement this Period

30.00

SUBTOTAL of Disbursements This Page (optional) .....

5035.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 34 / 36

☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)  
FREEDOM PROJECT; THE

**A.**

Full Name (Last, First, Middle Initial)  
Marino For Congress

Mailing Address PO Box 653

City State Zip Code  
Williamsport PA 17703-0653

Purpose of Disbursement  
Earmarked by Donald Burd 9/30/10

Candidate Name  
Thomas Anthony Marino

Office Sought: ☒ House  
☐ Senate  
☐ President

State: PA District: 10

Disbursement For: 2010  
☐ Primary ☒ General  
☐ Other (specify) ▼

011  
Category/  
Type

Transaction ID: SB23-12100-23235-e  
Date of Disbursement

10 / 05 / 2010

Amount of Each Disbursement this Period

5.00

**B.**

Full Name (Last, First, Middle Initial)  
Ruth McClung For Congress

Mailing Address PO Box 40544

City State Zip Code  
Tucson AZ 85717-0544

Purpose of Disbursement  
Earmarked by Donald Burd 9/30/10

Candidate Name  
Ruth Crawford McClung

Office Sought: ☒ House  
☐ Senate  
☐ President

State: AZ District: 07

Disbursement For: 2010  
☐ Primary ☒ General  
☐ Other (specify) ▼

011  
Category/  
Type

Transaction ID: SB23-12377-23231-e  
Date of Disbursement

10 / 05 / 2010

Amount of Each Disbursement this Period

5.00

**C.**

Full Name (Last, First, Middle Initial)  
Ryan Frazier For Colorado

Mailing Address PO Box 140182

City State Zip Code  
Edgewater CO 80214-0182

Purpose of Disbursement  
Earmarked by Marie Klein 9/28/10

Candidate Name  
Ryan L Frazier

Office Sought: ☒ House  
☐ Senate  
☐ President

State: CO District: 07

Disbursement For: 2010  
☐ Primary ☒ General  
☐ Other (specify) ▼

011  
Category/  
Type

Transaction ID: SB23-11995-23232-e  
Date of Disbursement

10 / 05 / 2010

Amount of Each Disbursement this Period

10.00

**SUBTOTAL** of Disbursements This Page (optional) .....

20.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)  
FREEDOM PROJECT; THE

**A.**

Full Name (Last, First, Middle Initial)

Ryan Frazier For Colorado

Mailing Address PO Box 140182

City  
Edgewater

State  
CO

Zip Code  
80214-0182

Purpose of Disbursement  
Earmarked by Milan Radonich 9/28/10

Candidate Name  
Ryan L Frazier

**011**  
Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2010  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: CO District: 07

**Transaction ID:** SB23-11995-23233-e  
Date of Disbursement

/   /

Amount of Each Disbursement this Period

100.00

**B.**

Full Name (Last, First, Middle Initial)

Tim Burns For Congress

Mailing Address PO Box 4483

City  
Eighty Four

State  
PA

Zip Code  
15330-0483

Purpose of Disbursement  
Earmarked by Henry Schea 9/27/10

Candidate Name  
Timothy Raymond Burns

**011**  
Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2010  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: PA District: 12

**Transaction ID:** SB23-11548-23234-e  
Date of Disbursement

/   /

Amount of Each Disbursement this Period

50.00

**SUBTOTAL** of Disbursements This Page (optional) .....

150.00

**TOTAL** This Period (last page this line number only) .....

5330.00

**SCHEDULE D (FEC Form 3X)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

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FOR LINE NUMBER:  
(check only one)
☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)  
FREEDOM PROJECT; THE

**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
NJi New Media, LLC

Nature of Debt (Purpose):  
Fundraising; Website deve-  
lopment and maint.

Mailing Address 201 King Street

City State ZIP Code  
Alexandria VA 22314-6600

Outstanding Balance Beginning This Period

19200.00

Transaction ID: SD10-DEBT23245

Amount Incurred This Period

0.00

Payment This Period

19200.00

Outstanding Balance at Close of This Period

0.00

1) **SUBTOTALS** This Period This Page (optional)..... ▶

0.00

2) **TOTALS** This Period (last page this line number only)..... ▶

0.00

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)..... ▶

0.00

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ▶

0.00